City of Banning

Residential Central Air Conditioner Rebate Application

First Name | Last Name | Initial

Address | City | State | Zip Code

Day Time Phone | Electric Account Number | Purchase Date

Old System Size_____ S.E.E.R._____ Make_____
(Tonnage) (Rating) Model #_____

Qualifying System (Circle one of the following) Split System or Packaged Unit

Size_____ S.E.E.R._____ Make_____
(Tonnage) (Rating) Condenser Model #_____
Evap Coil Model #_____ Serial #_____
ARI Reference #_____

I understand and agree that the choice of improvements, the selection of contractors, the purchase of items and acceptance of materials used and work performed, and the payments thereof, is my responsibility. I understand that the City of Banning does not endorse, recommend or make any representations as to specific brands, products, contractors or dealers; nor does it guarantee material or workmanship. I also agree to allow the City of Banning Public Utilities to access my premises for verification purposes. Rebates of $500.00 or less will be applied to the customer's electric account. Customers receiving $501.00, or more, in rebates will receive a rebate check.

_____ _____
Customer Signature Date

For office use only:

Authorization for payment: _____

_____ _____
Signature (Public Benefits Coordinator) Date

_____ _____
Signature (Public Benefits Program Manager) Date

Audit Completed by: _____Date_____ Cycle_____